

# TRANSMITTAL FORM

Application Serial Number	10/530,741
Filing Date	April 7, 2005
First Named Inventor	Flewelling
Group Art Unit	1645
Examiner Name	Not yet assigned
Attorney Docket No.	MDS-037
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) - Request for Corrected Filing Receipt - Copy of Filing Receipt with changes marked in red
<input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	
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## CORRESPONDENCE ADDRESS

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## SIGNATURE BLOCK

Respectfully submitted,

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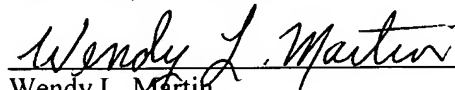
PATENT  
Attorney Docket No. MDS-037

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Flewelling *et al.* CONFIRMATION NO.: 9950  
SERIAL NO.: 10/530,741 GROUP NO.: 1645  
FILING DATE: April 7, 2005 EXAMINER: Not yet assigned  
TITLE: SYSTEM FOR IDENTIFYING, DISPLAYING, MARKING, AND  
TREATING SUSPECT REGIONS OF TISSUE

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 21<sup>st</sup> day of October, 2005.

  
Wendy L. Martin

Mail Stop Missing Parts,  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Request for Corrected Filing Receipt (2 pages);
3. Copy of Filing Receipt with corrections marked in red (3 pages); and
5. Return receipt postcard.



PATENT  
Attorney Docket No. MDS-037

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Flewelling et al. CONFIRMATION NO.: 9950  
SERIAL NO.: 10/530,741 GROUP NO.: 1645  
FILING DATE: April 7, 2005 EXAMINER: Not yet assigned  
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TREATING SUSPECT REGIONS OF TISSUE

Mail Stop Missing Parts  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR CORRECTED FILING RECEIPT**

1. Attached is a copy of the updated filing receipt mailed from the Patent Office on September 27, 2005, for the above-identified application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following data, which is:

☒ incorrectly entered

*and/or*

☐ omitted

***Error In***

***Correct Data***

- |  |              |
|--|--------------|
| 1. <input type="checkbox"/> Applicant's name   | 1.           |
| 2. <input type="checkbox"/> Applicant's address  | 2.           |
| 3. <input type="checkbox"/> Title  | 3.           |
| 4. <input type="checkbox"/> Filing Date  | 4.           |
| 5. <input type="checkbox"/> Serial Number  | 5.           |
| 6. <input type="checkbox"/> Foreign/PCT Application Re:  | 6.           |
| 7. <input checked="" type="checkbox"/> Other – Domestic Priority data<br>as claimed by applicant | 7. See below |

This application is a 371 of PCT/US2004/011820 04/16/2004  
which claims priority to 10/418,902 04/18/2003  
and claims priority to 60/560,384 04/07/2004  
This application claims priority to 10/418,902 04/18/2003  
and claims the benefit of 60/560,384 04/07/2004

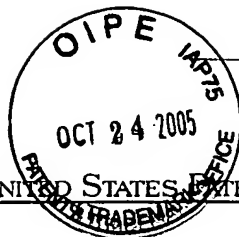
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UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/530,741	04/07/2005	1645	1250	MDS-037	113	33	3

CONFIRMATION NO. 9950

51414

GOODWIN PROCTER LLP  
PATENT ADMINISTRATOR  
EXCHANGE PLACE  
BOSTON, MA 02109-2881

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GOODWIN PROCTER LLP

FILING RECEIPT



\*OC000000017071843\*

Date Mailed: 09/27/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

Ross F Flewelling, Chelmsford, MA;  
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Jean-Pierre Schott, Weston, MA;  
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**Assignment For Published Patent Application**

MediSpectra, Inc., Lexington, MA

Power of Attorney: The patent practitioners associated with Customer Number 51414.**Domestic Priority data as claimed by applicant**

This application is a 371 of PCT/US04/11820 04/16/2004

which claims priority to which is a CIP of 10/418,902 04/18/2003  
and claims priority to and claims benefit of 60/560,384 04/07/2004

**Foreign Applications**

This application claims priority to 10/418,902 04/18/2003  
and claims the benefit of 60/560,384 04/07/2004

Projected Publication Date: 12/29/2005

Non-Publication Request: No

Early Publication Request: No

**\*\* SMALL ENTITY \*\*****Title**

Systems for identifying, displaying, marking, and treating suspect regions of tissue

**Preliminary Class**

435

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Almost every country has its own patent law, and a person desiring a patent in a particular country must make an application for patent in that country in accordance with its particular laws. Since the laws of many countries differ in various respects from the patent law of the United States, applicants are advised to seek guidance from specific foreign countries to ensure that patent rights are not lost prematurely.

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**Title 37, Code of Federal Regulations, 5.11 & 5.15**

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